

**IN THE UNITED STATES OF AMERICA
PATENT AND TRADEMARK OFFICE**

APPLICANT: Dr. Myron D. Ginsberg, M.D.

TITLE: "Neuroprotective Complex For Treatment of Ischemia and Injury"

ATTORNEY DOCKET NO.: 9021-3

COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

**DECLARATION FOR
UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)**

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original and first inventor of the subject matter which is claimed and for which a patent is sought on the above entitled invention, the specification of which

☐ is attached hereto; or

☒ was filed on January 23, 2004 as United States Application No. or PCT International Application No. _____ and was amended on n/a (if applicable).

I hereby state that I have reviewed and understand the content of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with 37 C.F.R. 1.56 (a).

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, and foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached? (Yes/No)
none				

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Provisional Patent Application Numbers(s)	Filing date
none	

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Nos.	Parent Filing Date	Parent Patent Number (if applicable)
none		

I declare under penalty of perjury under the laws of the United States of America that all statements made herein of my own knowledge are true and that all statements made on information and belief one believed to be true; and further that willful false statement and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor

Name	Dr. Myron D. Ginsberg	Citizenship	United States
Residence Address		Mailing Address	
Signature		Date signed	

**IN THE UNITED STATES OF AMERICA
PATENT AND TRADEMARK OFFICE**

APPLICANT: Dr. Nicolas G. Bazan, M.D., Ph.D.

TITLE: "Neuroprotective Complex For Treatment of Ischemia and Injury"

ATTORNEY DOCKET NO.: 9021-3

COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

**DECLARATION FOR
UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)**

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original and first inventor of the subject matter which is claimed and for which a patent is sought on the above entitled invention, the specification of which

☐ is attached hereto; or

☒ was filed on January 23, 2004 as United States Application No. or PCT International Application No. _____ and was amended on n/a (if applicable).

I hereby state that I have reviewed and understand the content of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with 37 C.F.R. 1.56 (a).

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, and foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached? (Yes/No)
none				

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Provisional Patent Application Numbers(s)	Filing date
none	

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Nos.	Parent Filing Date	Parent Patent Number (if applicable)
none		

I declare under penalty of perjury under the laws of the United States of America that all statements made herein of my own knowledge are true and that all statements made on information and belief one believed to be true; and further that willful false statement and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor

Name	Dr. Nicolas G. Bazan	Citizenship	United States
Residence Address	478 Broadway Street New Orleans, Louisiana 70118	Mailing Address	LSUHSC, 2020 Gravier Street New Orleans, Louisiana 70112
Signature		Date signed	